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TOTAL PAGES INCLUDING COVER SHEET: 18

TO: Commissioner for Patents

FROM: Gerald L. Coon

FIRM: USPTO

SUBJECT: S.N. 10/686,254; Atty. Ref.: D-21266

LOCATION: PO Box 1450
Alexandria, VA 22313-1450

DATE: January 24, 2005

FAX #: (703) 872-9306

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MESSAGE: COMMENTS: Attachments: Amendment – 13 pages; Petition for Ext. of Time in
duplicate; Amendment Transmittal Letter in duplicate

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Making Our Planet More Productive

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 10/686,254

Group Art Unit: 1621

Filed: October 16, 2003

Examiner: P. Nazario-Gonzalez

Inventor(s): David M. Thompson et al

Title: ASYMMETRIC GROUP 8 (VIII)
METALLOCENE COMPOUNDSAMENDMENT TRANSMITTAL LETTERCOMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application. The fee for this Amendment has been calculated as follows:

(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Present Extra	Rate	Additional Fee	Fee Code
Total Claims *21	Minus	** 20 =	1	X \$ 50	= \$ 50	103
Independent Claims 6	Minus	*** 3 =	3	X \$ 200	= \$ 600	102
First presentation of multiple dependent claims (\$360)					= \$ 0	104
Total additional fee for this Amendment					\$650	

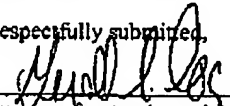
* If entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid for" in this space is less than 3, write "3" in this space.

1. ☐ No additional fee is required.
2. ☒ Charge \$650 to Deposit Account No. 16-2440 for this Amendment. A duplicate copy of this sheet is enclosed.
3. ☒ Please charge any additional fees which may be required by this Amendment, or credit any overpayment to Deposit Account No. 16-2440. A duplicate copy of this sheet is enclosed.

Respectfully submitted,


 Attorney for Applicant(s)
 Reg. No: 29910
 Gerald L. Coon

 Our Ref.: D-21266
 Danbury, Connecticut 06810-5113
 Date: January 24, 2005

 Praxair, Inc.
 Telephone No.: (203) 837-2292

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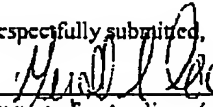
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AMENDMENTCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed July 26, 2004, please amend the
above-identified application as follows:

Certificate of Transmission

I hereby certify that this correspondence is being facsimile trans-
mitted to the United States Patent and Trademark Office, Fax No.
(703) 572-9326 on 1/24/05. (Date)

Typed or printed name of person signing this certificate:

MARGARET HANDY
Signature: Margaret Handy